

CLAIMS ONLY						SERIAL NO.		FILING DATE			
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.				IND.	DEP.
1											
2	1										
3		1									
4			1								
5				1							
6					1						
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21	1										
22											
23	SKIP										
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31											
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47											
48											
49											
50											
TOTAL IND.	6		↓			↓			↓		
TOTAL DEP.	39	←	←	←							
TOTAL CLAIMS	39										
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS											

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